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Number of Pages (Including this page)

Date: September 2, 2005

To: Brandon J. Miller - 2683

Location: United States Patent and Trademark Office

Fax No.: 571-273-8300

From: Valerie M. Davis - 50,203

Subject: 10/601,513- Crisler, et al.

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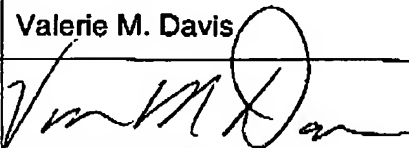
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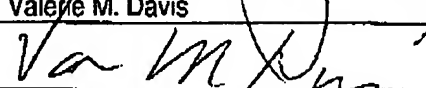
**MESSAGE:**

Enclosed herewith, please find AMENDMENT for filing in the above-identified application.

|   |                        |                   |  |
|---|------------------------|-------------------|--|
| <b>TRANSMITTAL FORM</b><br>(to be used for all correspondence after initial filing) | Application Number     | 10/601,513        |  |
|   | Filing Date            | 6/23/03           |  |
|   | First Named Inventor   | Crisler, et al.   |  |
|   | Group Art Unit         | 2683              |  |
|   | Examiner Name          | Brandon J. Miller |  |
| Total Number of Pages In this Submission  | Attorney Docket Number | CM05315G          |  |

| ENCLOSURES  |  |  | (check all that apply) |
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| <input type="checkbox"/> Fee Transmittal Form<br><input type="checkbox"/> Fee Attached<br><input checked="" type="checkbox"/> Amendment/Reply<br><input type="checkbox"/> After Final<br><input type="checkbox"/> Affidavits/Declaration(s)<br><input type="checkbox"/> Extension of Time Request<br><input type="checkbox"/> Express Abandonment Request<br><input type="checkbox"/> Information Disclosure Statement<br><input type="checkbox"/> Certified Copy of Priority Documents<br><input type="checkbox"/> Response to Missing Parts/<br>Incomplete Application<br><input type="checkbox"/> Response to Missing Parts<br>Under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Drawing(s)<br><input type="checkbox"/> Licensing-Related papers<br><input type="checkbox"/> Petition<br><input type="checkbox"/> Petition to Convert to a<br>Provisional Application<br><input type="checkbox"/> Power of Attorney, Revocation,<br>Change of Correspondence Address<br><input type="checkbox"/> Terminal Disclaimer<br><input type="checkbox"/> Request for Refund<br><input type="checkbox"/> CD, Number of CDs ____ | <input type="checkbox"/> After Allowance Communication to a<br>Technology Center (TC)<br><input type="checkbox"/> Appeal Communication to Board<br>of Appeals and Interferences<br><input type="checkbox"/> Appeal Communication to TC<br>(Appeal Notice, Brief, Reply Brief)<br><input type="checkbox"/> Proprietary Information<br><input type="checkbox"/> Status Letter with appropriate copies<br><input type="checkbox"/> Other Enclosure(s) (please identify below) |                        |
| Remarks<br>X Facsimile Transmittal  |  |  |                        |

| SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT |   |                  |        |
|--|---|------------------|--------|
| Firm or Individual                         | Valerie M. Davis  | Registration No. | 50,203 |
| Signature                                  |  |                  |        |
| Date                                       | September 2, 2005   |                  |        |

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| Typed or printed name  | Valerie M. Davis  |      |                   |
| Signature  |  | Date | September 2, 2005 |

